FEC FORM 3

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5020057

(C)

(<u>0</u>

Only

FE6AN023

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED ECRETARY OF THE SENATE PUBLIC RECORDS

16 OCT 240ments Johns

(Revised 02/2003)

| NAME OF COMMITTEE (in full) | TYPE OR PRINT ▼ | | mple: If typing r the lines. | , type | 12FE4M5 | | | |
|---|--|----------------|---|------------------|--|-----------------|----------------|------------|
| ADDRESS (number and street) Check if different than previously reported. (ACC) FEC IDENTIFICATION N | 2969-16 2elham umber v | - Pell | nam P | Wwy. | | 3.57.2.5 ZIP | | • |
| 4. TYPE OF REPORT (Cr (a) Quarterly Reports: April 15 Quarterly July 15 Quarterly October 15 Quarter January 31 Year-E | Report (Q1) Report (Q2) orly Report (Q3) and Report (YE) (c) | Election on | Election Report Primary (12P) Convention (1 | 2C) / | General (1 Special (1 Y Y Y Y Runoff (30 | 2S) ir s | n the state of | ial (30S) |
| 5. Covering Period I certify that I have examined to Type or Print Name of Treasure Signature of Treasurer NOTE: Submission of false, error | Pef A | best of my kno | mpton | pelief it is tru | ate 70 | d complete. | 7 20 | .C. §30109 |
| Office Use | | | | | | | FORM | |

SUMMARY PAGE

of Receipts and Disbursements

| | FEC Form 3 (Revised 02/2003) | of Neceipis and Disputerments | Page Z |
|-----|---|---|---|
| w | crite or Type Committee Name | For Alabana | <u> </u> |
| R | eport Covering the Period: From: | ST' O' ZOCC | o |
| | | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
| i. | Net Contributions (other than loans) | | |
| | (a) Total Contributions (other than loans) (from Line 11(e)) | 6062,49 | 31,0,66,4 |
| | (b) Total Contribution Refunds (from Line 20(d)) | , , , , <u>()</u> , o, o | , <u>()</u> 0 |
| | (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | , 606,249 | 3,0,6,4 |
| | Net Operating Expenditures | | |
| | (a) Total Operating Expenditures (from Line 17) | 5G47.1.1 | 27.090 |
| | (b) Total Offsets to Operating Expenditures (from Line 14) | QOD | , <u>, , , , , , , , , , , , , , , , , , </u> |
| | (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 5,94,711 | 27,090.1 |
| ١. | Cash on Hand at Close of Reporting Period (from Line 27) | 7 | |
|). | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 7,0000 | |
| | | For further information contact: | |
| | | Federal Election Commission 999 E Street, NW Washington, DC 20463 | |
| | | Toll Free 800-424-9530 Local 202-694-1100 | |

| Γ | FEC Form 3 (Revised 12/2003) | DETAILED SUMMARY PAGE of Receipts | Page 3 |
|-----------------------|---|---|---|
| | Write or Type Committee Name | <u> </u> | rage 3 |
| F | Report Covering the Period: From: | 7 61 20 6 | 29 BOY |
| _ | I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
| 11. | . CONTRIBUTIONS (other than loans) FROM: | | |
| | (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) (ii) Unitemized | , .2,1.0,0,0,6, 3,3.4,7,1.1 5,7.4,7,1.1 | 1,5,0,3,9,0,0 1,5,5,1,2,1,1 30,60,1,(.) |
| | (b) Political Party Committees(c) Other Political Committees(such as PACs) | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , 450 <u>0</u> 0 |
| | (d) The Candidate (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) | 6,0,47.1.1 | 31,05111 |
| 12 | . TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | |
| 13 9 9 | . LOANS: (a) Made or Guaranteed by the Candidate (b) All Other Loans (c) TOTAL LOANS | ., | - 6.1.7.0.0.00 |
| い 月 月 り り | (add Lines 13(a) and (b)) OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 20.0.0.6 | (.7.0.0.0.0 |
| 원 - 15 15 연기 15 | OTHER RECEIPTS (Dividends, Interest, etc.) | C | |
| 10 — | . TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) | 7,24,2,1.1 | 32,75,1.1 |
| 2010 | SANO18 | | |

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

| | II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|-----|--|---|--|
| 17. | OPERATING EXPENDITURES | 5.4.4.7.1.1 | |
| 18. | TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | 0>-0>-0>-0>-0>-0>-0>-0>-0>-0>-0>-0>-0>-0 |
| 19. | LOAN REPAYMENTS: | | |
| | (a) Of Loans Made or Guaranteed by the Candidate | , 5,0,0,0,0 | , 1,0,0,0,0 |
| | (b) Of All Other Loans | O) | |
| | (c) TOTAL LOAN REPAYMENTS | | / 0 0 0 0 |
| | (add Lines 19(a) and (b)) | <u>, , , , , , , , , , , , , , , , , , , </u> | (,0,0,0,0 |
| 20. | REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other | | |
| | Than Political Committees | 0 | |
| | (b) Political Party Committees | Ô | |
| | (c) Other Political Committees | 2 | |
| | (such as PACs) | | |
| | (d) TOTAL CONTRIBUTION REFUNDS | 4 F F 4 F F F F F F F F F F F F F F F F | |
| | (add Lines 20(a), (b), and (c)) | · · · · · · · · · · · · · · · · · · · | |
| 21. | OTHER DISBURSEMENTS | 0 | |
| 22. | TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) | 5,9.47.11 | , 20,09,01 |
| _ | III. CASH SUMM | IARY | |
| 23. | CASH ON HAND AT BEGINNING OF REPORTING | G PERIOD | 3,91,00 |
| 24 | TOTAL RECEIPTS THIS PERIOD (from Line 16, p | page 3) | 7,247 |
| 25. | SUBTOTAL (add Line 23 and Line 24) | | , 11, 1, 5, 7, |
| 16. | TOTAL DISBURSEMENTS THIS PERIOD (from Lir | ne 22) | 5,9,47 |
| 7. | CASH ON HAND AT CLOSE OF REPORTING PE | RIOD | F3166 |

| SCHEDULE A (FEC Form 3) | Use separate schedule(s) | FOR LINE NUMBER: PAGE OF (check only one) |
|--|---|---|
| ITEMIZED RECEIPTS | for each category of the Detailed Summary Page | 11a 11b 11c 11d 11d 12 13a 13b 14 15 |
| Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and a | ay not be sold or used by any postderess of any political committee | erson for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | • | |
| Full Name (Last, First, Middle Initial) A. Progressive Women of No. Mailing Address 373 @ County Rcl 12C State | E Alabama Lip Code 2 C 2 C 4 (| Date of Receipt |
| FEC ID number of contributing federal political committee. Name of Employer Occupation | 55 777 | Amount of Each Receipt this Period |
| MA | //A /cle-to-Date | |
| Full Name (Last, First, Middle Initial) B. Ann Jugger Mailing Address 24 /7 Scenic Drive City State | Zip Code | Date of Receipt |
| FEC ID number of contributing federal political committee. Name of Employer Occupation | etired | Amount of Each Receipt this Period |
| Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) | rcle-to-Date | |
| c. Steven Crun K Mailing Address City State State | Zlp Code | Date of Receipt |
| FEC ID number of contributing federal political committee. Name of Employer Occupation | | Amount of Each Receipt this Period |
| Receipt For: Primary General Other (specify) Election Cyc | tiree | |
| SUBTOTAL of Receipts This Page (optional) | | 200,00 |

| SCHEDULE A (FEC Form 3) | Use separate schedule(s) | FOR LINE NUMBER: PAGE OF (check only one) | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|
| ITEMIZED RECEIPTS | for each category of the Detailed Summary Page | 11a 11b 11c 11d _ | | | | | | | |
| Any information copied from such Reports and Statements | | 12 13a 13b 14 15 | | | | | | | |
| or for commercial purposes, other than using the name an | d address of any political committ | ee to solicit contributions from such committee. | | | | | | | |
| NAME OF COMMITTEE (In Full) | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | | | |
| A. Herman Miskelly Mailing Address | | Date of Receipt | | | | | | | |
| 3234 Hurricane Oc | | 00 26 2016 | | | | | | | |
| New Market Al | Zip Code 35 76/ | | | | | | | | |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period | | | | | | | |
| Name of Employer Occupat | ion | - L., locoo | | | | | | | |
| Receipt For: | xecutive | | | | | | | | |
| Primary General | Cycle-to-Date | | | | | | | | |
| Other (specify) | <u>, , , , , , 6,0,00</u> | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. Time Pierce | | Date of Receipt | | | | | | | |
| Mailing Address 3868 Ole Mill Rd. | | 63'[[[20]] | | | | | | | |
| City State | Zip Code | 0.2 1.1 20.16 | | | | | | | |
| Trussuille Al. | <u>35173</u> | | | | | | | | |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period | | | | | | | |
| Name of Employer Occupation | on | 10000 | | | | | | | |
| | ganizer | | | | | | | | |
| Receipt For: Election Primary General | Cycle-to-Date | . | | | | | | | |
| Other (specify) | ,, l <u>000</u> 0 | | | | | | | | |
| Full Name (Last, First, Middle Initial) Edward Last Form | | Date of Descript | | | | | | | |
| Mailing Address | | Date of Receipt | | | | | | | |
| 8275 Taddish Drive | Zip Code | 02'02'2016 | | | | | | | |
| Mobile Al. | 35242 | | | | | | | | |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period | | | | | | | |
| Name of Employer Occupation | on . | 10000 | | | | | | | |
| Archetectural Opening Services P | resident Cycle-to-Date | | | | | | | | |
| Primary General | 1.0 | | | | | | | | |
| Other (specify) | ,,\ <u>Co@</u> 0 | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional) | | 30,0,00 | | | | | | | |
| TOTAL This Period (last page this line number only) | | | | | | | | | |

| SCHEDULE A (FEC Form 3) | | FOR LINE NUMBER: PAGE OF |
|--|---|--|
| ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the | (check only one) |
| ITEMIZED RECEIPTS | Detailed Summary Page | 11a 11b 11c 11d 12 13a 13b 14 15 |
| Any information copied from such Reports and Statement or for commercial purposes, other than using the name a | erson for the purpose of soliciting contributions | |
| NAME OF COMMITTEE (In Full) | | Source Continued on the Source |
| Full Name (Last, First, Middle Initial) A. Dauch Elder Mailing Address City State | Zip Code | Date of Receipt |
| Birmingham Al | 35242 | |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period |
| Name of Employer Water Employed Receipt For: Cocup | ation Pot Employed on Cycle-to-Date | |
| Primary General Other (specify) | , <u>\$000</u> | |
| Full Name (Last, First, Middle Initial) B. Ecr Evans | | Date of Receipt |
| Mailing Address GII Pearborn Aue City State | Zip Code | <u> </u> |
| FEC ID number of contributing federal political committee. | <u>3566</u> | Amount of Each Receipt this Period |
| Name of Employer Occup | ation | , , , , , , , , , , , , , , , |
| Receipt For: Primary Other (specify) Electio | n Cycle-to-Date 100,00 | |
| Full Name (Last, First, Middle Initial) | | Date of Receipt |
| City State | Zip Code | 69 (7) 20 (6 |
| FEC ID number of contributing federal political committee. | 35/3/2 | Amount of Each Receipt this Period |
| Name of Employer Occup | ation // | 20000 |
| Réceipt For: Primary General Other (specify) | n Cycle-to-Date | |
| SUBTOTAL of Receipts This Page (optional) | | , <u>, , , , , , , , , , , , , , , , , , </u> |
| TOTAL This Paried flast page this line number only | | |

| | CHEDULE A (FEC Form 3) FEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE OF (check only one) 11a |
|------------------------|--|---|--|
| A | ny information copied from such Reports and Statements r for commercial purposes, other than using the name and | may not be sold or used by any p I address of any political committe | person for the purpose of soliciting contributions |
| | NAME OF COMMITTEE (in Fuil). | | |
| A | Mailing Address YO BOX 2465 City // State | Zip Code | Date of Receipt |
| | FEC ID number of contributing federal political committee. | 35986 | Amount of Each Receipt this Period |
| | Name of Employer Not employed Receipt For: Primary Other (specify) Coccupation Occupation Occup | Employed Cycle-to-Date | |
| В | Full Name (Last, First, Middle Initial) Lucille Bodenheimer Mailing Address PO BCX City Annistan Al. | Zip Code | Date of Receipt |
| | FEC ID number of contributing federal political committee. Name of Employer Self Employed PS | On Ichologist Cycle-to-Date 20000 | Amount of Each Receipt this Period |
| က (၈) (၈) (၈) | Full Name (Last, First, Middle Initial) Patrick Taylor Mailing Address | NW. | Date of Receipt |
| 200573 | FEC ID number of contributing federal political committee. Name of Employer Occupation | 35806 | Amount of Each Receipt this Period |
| 110258 | Receipt For: Primary General Other (specify) | Cycle-to-Date | |
| | SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only) | · · · | |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE OF (check only one) 11a |
|---|---|---|
| Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a | ay not be sold or used by any paddress of any political committee | erson for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | | |
| Full Name (Last, First, Middle Initial) A Dona Marlow Mailing Address PO Box 334 City State | Zip Code | Date of Receipt |
| FEC ID number of contributing federal political committee. | 36547 | Amount of Each Receipt this Period |
| Name of Employer Cocupation Receipt For: Primary Other (specify) Election Cy | ycle-to-Date | |
| Full Name (Last, First, Middle Initial) B. Tom Ryan Mailing Address OD Featherstone Lane City State | Zip Code | Date of Receipt |
| FEC ID number of contributing federal political committee. Name of Employer Occupation | 35763 | Amount of Each Receipt this Period |
| Receipt For: Primary General Other (specify) | ycle-to-Date | |
| Full Name (Last, First, Middle Initial) C. Mailing Address S / S Hillyer High City State | Zip Code | Date of Receipt |
| FEC ID number of contributing federal political committee. Name of Employer Occupation | 36207 | Amount of Each Receipt this Period |
| Adjunct Instructor Tro | / | |
| SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only) | · " | 300.00 |

| S | CHEDULE B (FEC Form 3) | 14 | FOR LINE NUMBER: PAGE OF |
|-----------------|--|---|--|
| | EMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only one) 19a 19b |
| | | Detailed Summary Page | 20a 20b 20c 21 |
| Ar | ly information copied from such Reports and Statements r for commercial purposes, other than using the name and | nay not be sold or used by any | person for the purpose of soliciting contributions |
| Ž | NAME OF COMMITTEE (In Full) | address of any pointed commit | to to solicit contributions from such committee. |
| $\perp \rangle$ | | | |
| Ľ, | Full Name (Last, First, Middle Initial) | | |
| A. | 011 | | Date of Disbursement |
| | Habama lower | · | 07/01/2016 |
| | Mailing Address | | |
| | City State | Zip Code | Amount of Each Disbursement this Period |
| | Perpose of Disbursement | | 34060 |
| | Yower Deasit | | , , , , , , , , , , , , , , , , , , , |
| | Candidate Name | Category | 7 |
| | Office Sought: House Disbursement For | r: Type | |
| | Senate Primary | | |
| | President Other (s | specify) | |
| _ | Full Name (Last, First, Middle Initial) | | |
| В. | ATT | | Date of Disbursement |
| | Mailing Address | | 0.7 ' 25' 25' LG |
| | Alt. | | |
| | City State | Zip Code | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | | 1,9,7,93 |
| | 13,11 | | |
| | Candidate Name Quen Crumpton | Category, Type | / |
| | Office Sought: House Disbursement For | ** | \dashv |
| | Senate Primary | General | |
| | President Other (s | specify) | |
| , | Full Name (Last, First, Middle Initial) | | |
| C. | Alchama | Para | Date of Disbursement |
| | Mailing Address | Vower | 27/14/2016 |
| | | | |
| | City State Zi | p Code | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | | - OUCAG |
| | Electore Bill | | |
| | Candidate Name Crumpton | Category/ | ⁷ |
| | Office Sought: House Disbursement For | Type: | - |
| | Senate | / | |
| | President Other (s | pecify) | |
| Г | Oldinot. | | |
| ıl l | UBTOTAL of Disbursements This Page (optional) | | <u></u> |
| , | | | |
| 1 " | OTAL This Period (last page this line number only) | | |

| SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE OF (check only one) |
|---|---|---|
| Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and a | ay not be sold or used by any | person for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | out of any position commit | too to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) A. A. Malling Address City State Purpose of Disbursement Cardidate Name Office Sought: House Disbursement For: Senate Primary | Zip Code Category, Type | Date of Disbursement Amount of Each Disbursement this Period |
| State: District: Other (sp. State: Name (Last, First, Middle Initial) B | Zip Code | Date of Disbursement |
| Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Disbursement For: Genate Primary President Other (sp. | Category/ Type | Amount of Each Disbursement this Period |
| Full Name (Last, First, Middle Initial) C. Mailing Address Mailing Address | | Date of Disbursement |
| Purpose of Disbursement Candidate Name Concludate Name | Category/ Type General | Amount of Each Disbursement this Period |
| SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only) | | 2,1.6.3.12 |

| SCHEDULE B (FEC Form 3) | Use separate schedule(s) | | NE NUMB only one) | ER: | PAGE | | OF | |
|---|---|---------------------------------------|---------------------------------------|-----------|-----------|----------------|-------------|----------------|
| ITEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | | 17 20a | 18 20b | — | 19a 20c | \vdash | 19Ь 21 |
| Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and a | ay not be sold or used by any | person i | or the purp | oose of s | olicitina | contrib | nitio | ne |
| NAME OF COMMITTEE (In Full) | doress of any political commi | nee to so | uicit contric | utions in | om such | comm | πιπε | } . |
| Full Name (Last, First, Middle Initial) | | | ate of Disb | umamant | | | ** | |
| A. Hasana Power Mailing Address | | | | 23 | | م م م م م | ٧ | |
| | 71- 0-1- | ر | | | | | | |
| | Zip Code | Ar | nount of E | ach Disbu | *_* | | | nd . |
| Purpose of Disbursement Cffce Power B, (1-1) Candidate Name | Category | ֻ ֻׁ | . | | _,:3,2 | _مار_ | <u>7.</u> 1 | |
| Office Sought: House Disbursement For: Senate Primary | General | | | | | | | |
| State: District: | оеспу) | | | | | | | |
| Full Name (Last, First, Middle Initial) | | Da | ate of Disb | ursement | | | | |
| Mailing Address | | | ' گر | | Žč | ا) د | Č | |
| City State | Zip Code | An | nount of Ea | ach Disbu | ırsemen | t this F | Perio | —— d |
| Purpose of Disbursement Shone Bill office - Candidate Name Crumpton | Sept- Category, Type | ֓֞֞֞֞֞֞֞֞֞֞֞֓֓֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞ | -la ŝ. | | ,2c |) <u>.</u> 8.c | <u>l</u> . | <u>J</u> |
| Office Sought: House Senate President State: Disbursement For: Primary Other (sp. | [General | | | | | | | |
| Full Name (Last, First, Middle Initial) | | Da | ite of Disbu | reement | | | | |
| Mailing Address / LLC | | | , 9 ′ | | ر ب | š į (| | |
| City State Zip | Code | Am | nount of Ea | ch Disbu | rsement | this P | erioc | |
| Purpose of Disbursement Candidate Name Purpose of Disbursement Rent - Soft Candidate Name | Category/ | ן כ | - | B. JAB | 95 | <i>'0</i> (| ွင |] |
| Office Sought: House Disbursement For: Senate Primary President Other (spe | Type | | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | | | 4.8 | 34. | 8.5 | <u> </u> |
| TOTAL This Period (last page this line number only) | | | * * * * * * * * * * * * * * * * * * * | | 7 | | - | ĺ |

| | ULE B (FEC Form 3) ED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE OF (check only one) |
|-----------------------|--|---|--|
| Any Inform | ation copied from such Reports and Statements mercial purposes, other than using the name and | nay not be sold or used by any | person for the purpose of soliciting contributions |
| NAME | OF COMMITTEE (In Full) | address of any political committee | tee to solicit contributions from such committee. |
| A. A. Mailing | labang Power Address | | Date of Disbursement |
| City | State | Zip Code | Amount of Each Disbursement this Period |
| Pour Candida | te Name Supply House Disbursement For: Senate Primary | Category, Type |],,, |
| State: | President Other (specification of the president Other (specification o | | |
| Mailing | | | Date of Disbursement |
| City | State | Zip Code | Amount of Each Disbursement this Period |
| Purpose | of Disbursement e Name | Category/ Type | |
| Office So | Senate Disbursement For: Senate Primary President Other (sp. | General Decify) | |
| Full Nam C. Mailing A | e (Last, First, Middle Initial) | | Date of Disbursement |
| Mailing A | ddress | | M M / O D / Y Y Y Y |
| * | State Zip | Code | Amount of Each Disbursement this Period |
| D | of Disbursement | | j 100 j 101 s c 100 |
| Candidat | e Name | Category/ Type | 4 |
| Office So | ught: House Disbursement For: Senate Primary President Other (sp | General | |
| SUBTOTAL | of Disbursements This Page (optional) | | 1 293.7.1 447.459 |

| SCHEDULE C (FEC Form 3) | Use separate schedule(s) | PAGE OF | | | |
|--|---|--|-------------------------------------|--|--|
| LOANS | for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) 13a | | | |
| NAME OF COMMITTEE (In Full) | ~ for | Alabama | | | |
| LOAN SOURCE Full Name (Last, First, Middle | Y / 1 | | ction: Primary | | |
| Mailing Address 1874 Trailriege | Dile | | General Other (specify) ▼ | | |
| | ate ZIP Code | 24 | | | |
| Original Amount of Loan | Cumulative Payment To D | ate Balance (| Outstanding at Close of This Period | | |
| TERMS | <u></u> | مبا لنوي | , , , , , , , , O, O, O, O | | |
| Date Incurred | Date Due | Interest Rate | Secured: Secured: Yes No | | |
| List All Endorsers or Guarantors (if any) to L | oan Source | | 163 / NO | | |
| Full Name (Last, First, Middle Initial) | | lame of Employer | | | |
| Mailing Address | - | Occupation | | | |
| City State 2 | ZIP Code | unount Guaranteed Outstanding: | - (C) | | |
| 2. Full Name (Last, First, Middle Initial) | N | lame of Employer | | | |
| Mailing Address | | Occupation | - | | |
| City State Z | IP Code | Amount Guaranteed Outstanding: | () | | |
| 3. Full Name (Last, First, Middle Initial) | · N | lame of Employer | | | |
| Mailing Address | C | Occupation | | | |
| City State Z | IP Code G | mount juaranteed outstanding: | 6 | | |
| 4. Full Name (Last, First, Middle Initial) | N | ame of Employer | | | |
| Mailing Address | O | ccupation | | | |
| City State Z | IP Code G | mount juaranteed jutstanding: | | | |
| SUBTOTALS This Period This Page (optional) | | | | | |
| TOTALS This Period (last page in this line only) | | · [| n790,99 | | |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | | | | | |

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SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

| Supplementary for | | | |
|----------------------|--|--|--|
| Information found on | | | |
| Page of Schedule C | | | |

| LENDING INSTITUTION (LENDER) Full Name Amount of Loan | Federal Election Commission, Washington, D.C. 20463 | | | |
|--|---|--|---|--|
| Mailing Address Date Incurred or Established Date Due A. Hias loan been restructured? No Yes If yes, date originally incurred City State Zip Code Date Due A. Hias loan been restructured? No Yes If yes, date originally incurred C. Are other parties secondarily labels for the debt incurred? D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivesible, cash on deposit, or other similar traditional collateral? No Yes If yes, specify: Does the lander have a perfected securit interest in it? No Yes E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: Does the lander have a perfected securit interest in it? No Yes E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: Does the lander have a perfected securit interest in it? No Yes E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: Does the lander have a perfected securit interest in it? No Yes Location of account: Address: Date account established: Date account established: The neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. H. Attach a signed copy of the loan agreement. I. To BE SIGNED BY THE LENDING INSTITUTION. I. To the best of this institution's knowledge, the terms of the ioan and other information regarding the extension of the loa are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed is diminiar actarisions of credit to other borrowers of comparable credit worthiness. AUTHORIZED REPRESENTATE | NAME OF COMMITTEE (in Full) | | FEC IDENTIFICATION NUMBER | |
| Date Incurred or Established Date Due A. Has loan been restructured? No Yes If yes, date originally incurred B. If line of credit, Amount of this Draw: C. Are other parties secondarily liable for the debt incurred? No Yes Endorsers and guarantors must be reported on Schedule C.) D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts resclevable, cash on deposit, or other similar traditional collateral? No Yes If yes, specify: E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: Address: Date account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Address: City, State, Zip: F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. G. COMMITTEE TREASURER Typed Name Signature H. Attach a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION: 1. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loa are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed is similar extensions of cradit to other bornowers of comparable cradit worthiness. III. To late signed with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. AUTHORIZED REPRESENTATVE DATE | | inclusive rate (A.11) | | |
| B. If line of credit, Amount of this Draw: C. Are other parties secondarily liable for the debt incurred? No Yes (Endorsers and guarantors must be reported on Schedule C.) D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No Yes If yes, specify: Does the lender have a perfected securificates of other similar traditional collateral? No Yes If yes, specify: E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Address: City, State, Zip: F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. G. COMMITTEE TREASURER Typed Name Signature H. Attach a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION: 1. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loa are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed is similar extensions of credit to other bornovers of comparable credit worthness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. | | | M M / 6 6 / Y Y Y Y Y | |
| D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No | B. If line of credit, Amount of this Draw: C. Are other parties secondarily liable for the debt incum | Total Outstanding Balance: | | |
| A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: City, State, Zip: F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. G. COMMITTEE TREASURER Typed Name Signature H. Attach a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION: 1. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loa are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed it similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. AUTHORIZED REPRESENTATIVE | D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other. No Yes If yes, specify: E. Are any future contributions or future receipts of interest. | loan: real estate, personal f deposit, chattel papers, r similar traditional collateral? Do interest income, pledged as | es the lender have a perfected security erest in it? No Yes | |
| G. COMMITTEE TREASURER Typed Name Signature H. Attach a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed is similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. AUTHORIZED REPRESENTATIVE | to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: | Address: | | |
| H. Attach a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed in similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. AUTHORIZED REPRESENTATIVE | exceed the loan amount, state the basis upon which t | as pledged for this loan, or if the a this loan was made and the basis | amount pledged does not equal or on which it assures repayment. | |
| I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. III. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed is similar extensions of credit to other borrowers of comparable credit worthiness. IIII. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. AUTHORIZED REPRESENTATIVE DATE | Typed Name | | DATE | |
| DAIL | TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the teare accurate as stated above. The loan was made on terms and conditions (incompliant extensions of credit to other borrowers of the III. This institution is aware of the requirement that a complied with the requirements set forth at 11 C. | cluding interest rate) no more favor f comparable credit worthiness. a loan must be made on a basis w | rable at the time than those imposed for which assures repayment, and has | |
| Signature Title | | e | DATE | |

| CHEDULE D (FEC Form 3) EBTS AND OBLIGATIONS | | schedule(s) | (Use separate schedule(s) for each numbered line) | | |
|--|---|-----------------|---|--|--|
| cluding Loans | | | | | |
| AME OF COMMITTEE (In Fuil) | | | | | |
| | | | | | |
| A. Full Name (Last, First, Middle Initial) of De | ebtor or Creditor | Nature of D | Debt (Purpose): | | |
| NA CO | | | | | |
| Mailing Address | | | | | |
| City State | Zip Code | | | | |
| Outstanding Balance Beginning This Period | | | | | |
| 0 0 | | | | | |
| Amount Incurred This Period | Payment This Period | Outstand | ing Balance at Close of This | | |
| (1) | 3) | | (3) | | |
| B. Full Name (Last, First, Middle Initial) of De | btor or Creditor | Nature of E | Debt (Purpose): | | |
| | | | | | |
| Mailing Address | · · · · · · · · · · · · · · · · · · · | | | | |
| City State | Zip Code | | | | |
| | | | | | |
| Outstanding Balance Beginning This Period | | | | | |
| | | | | | |
| Amount Incurred This Period | Payment This Period | Outstand | ing Balance at Close of This | | |
| | | | (D | | |
| C. Full Name (Last, First, Middle Initial) of Do | ebtor or Creditor | Noture of C | Debt (Purpose): | | |
| (2004) (2004) (3004) (3004) | | Mature of t | seor (r dipose). | | |
| Mailing Address | | | | | |
| City | State Zip Code | | | | |
| | | | | | |
| Outstanding Balance Beginning This Period | | | | | |
| | | | | | |
| Amount Incurred This Period | Payment This Period | Outstandi | ing Balance at Close of This | | |
| | | نا اند | | | |
| | | | | | |
| SUBTOTALS This Period This Page (optional |) | <u> </u> | <u> </u> | | |
| TOTALS This Period (last page this line num | ber only) | - [[| | | |
| TOTAL OUTSTANDING LOANS from Sched | ** | | 7000 | | |
| | | | | | |
| ADD 2) and 3) and carry forward to appropri | iate line of Summary Page (last page of | only) | | | |

FEC FORM 3Z (File with Form 3)

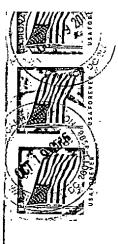
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

| Name of Principal Campaign Committee (In Full) Report Covering Period: From: To: | | | | | | | |
|---|--|---|---|--|---|---|--|
| Crampton for Habama 1051 [201 G] 1201 G] 1301 701 G] | | | | | | | |
| | Committee Name (a) (b) Line No. 11(a) Total Contributions From Indiv/Persons Other Than Political Committees Committees Committees Committees Committees | | | | | | |
| Α | | | | | 2100,00 | 100,00 | |
| ВС | olumn Total Last Page O | nly | | | 15,689,66 | 450.00 | |
| | (c) Line No. 11(c) Total Contributions From Other Political Committees | (d) Line No. 11(d) Total Contributions From The Candidate | (e) Line No. 11(e) Total Contributions | (f) Line No. 12 Total Transfers From Other Authorized Committees | (g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate | (h) Line No. 13(b) Total All Other Loans | |
| Α | 0 | 0 | 10047.11 | 0 | 1,200.00 | 0 | |
| В | 0 | 0 | 31,657,11 | 0 | 1,700,00 | 0 | |
| | (i) Line No. 13(c) Total Loans | (i) Line No. 14 Total Offsets to Operating Expenditures | / (k) Line No. 15 Total Other Receipts | (f) Line No. 16 Total Receipts | (m) Line No. 17 Total Operating Expenditures | (n) Line No. 18 Total Transfers to Other Authorized Committees | |
| Α | 1260.60 | 0 | 0 | 7247.11 | 5,447.11 | 0 | |
| В | 1,700.00 | 0 | 0 | 32,751.11 | 27, 090, 11 | 0 | |
| | J (c) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate | (p) Line No. 19(b) Total Loan Repayments of All Other Loans | (q) Line No. 19(c) Total Loan Repayments | (r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons | (s) Line No. 20(b) Total Contribution Refunds to Political Party Committees | (t) Line No. 20(c) Total Contribution Refunds to Other Political Committees | |
| A | 500,00 | 0 | 506,00 | 0 | 0 | 0 | |
| В | 1.00,60 | B | 1,000,60 | 0 | 0 | 0 | |
| | (u) Line No. 20(d) Total Contribution Refunds | (v) Line No. 21 Total Other Disbursements | (w) Line No. 22 Total Disbursements | (x) Line No. 23 Cash on Hand Beginning of Reporting Period | (y) Line No. 27 Cash on Hand Close of Reporting Perlod | (z) Line No. 9 Debts & Obligations Owed TO the Committee | |
| A | | | | | | | |
| В | | | | | | | |
| | (aa) Line No. 10 Debts & Obilgations Owed BY the Committee | (bb) Line No. 6(c) Net Contributions | (cc) Line No. 7(c) Net Operating Expenditures | | | | |
| Ā | 700.00 | 6062,49 | 5947.11 | | | | |
| В | 1700,00 | 3400 | 27,090.11 | | | | |
| 3 (0 6 6 . 49 FEC Form 3Z (Revised 02/2003) | | | | | | | |

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Washington, D.C. 20013-7578 OFFice of Public Records Secretary of the Senate P.O. BOX 77578

HART SENATE OFFICE BUILDING SUITE 232

United States Senate
office of the secretary

WASHINGTION, DC 20510-7116

OFFICE OF PUBLIC RECORDS

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PHONE(202) 224-0322

| HAND DELIVERED |
|---|
| HAND DELIVEREDDate of Receipt |
| USPS FIRST CLASS MAIL 10 - 24 - 14 10 - 19 - 16 Date of Receipt Postmark |
| USPS REGISTERED/CERTIFIED |
| Postmark |
| USPS PRIORITY MAIL |
| Postmark |
| DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL |
| USPS EXPRESS MAIL Postmark |
| OVERNIGHT DELIVERY SERVICE: |
| SHIPPING DATE NEXT BUSINESS DAY DELIVERY |
| FEDERAL EXPRESS |
| UPS |
| DHL |
| AIRBORNE EXPRESS |
| |
| RECEIVED FROM FEDERAL ELECTION COMMISSION Date of Receipt |
| POSTMARK ILLEGIBLE NO POSTMARK |
| FAX Date of Receipt |
| OTHER |
| PREPARER HB DATE PREPARED 10 - 24-14 |



SEN PATCH



SEN PATCH